IV. DENTAL SERVICES FOR OLDER AND DISABLED ADULTS

Current Providers:	
Funding Sources Accepted:	

A. EXISTENCE		
Are these services available to older and		
disabled adults in your community?		
1. Does your community have at least one dental care	Yes	No
provider?		
2. Does your community have at least one dental care provider	Yes	No
who accepts Medicaid?		
3. Does your community have at least one dental care provider	Yes	No
who will provide dental services to older and disabled		
adults living in assisted living facilities, adult care homes,		
and nursing facilities?		
4. If your community does not have dentists who serve older	Yes	No
and disabled adults in assisted living facilities, adult care		
homes, and/or nursing homes, are there dentists in		
neighboring communities or counties that could provide		
services?		
5. Does your local health department offer any dental care	Yes	No
services for older adults (ex. Screenings, educational		
programs, etc.)?		
6. Does your community have clinics that provide dental	Yes	No
services for low-income older and disabled adults?		
7. Does your community have at least one dental care	Yes	No
provider who can make dentures?		
OVERALL EXISTENCE RATING	1 2	3 4 5

B. ADEQUACY Are these services in sufficient supply for those who	need it?			
1. Is there a waiting list for:	lieeu it !			
Dental clinics serving low-income older and disabled adults?	Yes		N	Ю
Dentists who accept Medicaid?	Yes		N	10
If so, how many people are waiting? Dental clinics: Dentists who accept Medicaid:				
Why is there a waiting list?				
(How many are currently on the waiting list? How many currently receive service? What is the ratio of the number waiting ÷ the number of people receiving service? How does this ratio compare to the state ratio and similar counties? If there are no people on the waiting list, is it because everyone who needs services receives them, providers do not keep waiting lists, etc.?)				
2. To what extent do adults have choices in your community as to dentists?	1 2	3	4	5
(How many dentists are available county-wide? How many are currently taking new patients? Where are dentists located? Are there any large rural areas that do not have a dentist within 20 miles? What is the number of dentists per 1,000 older and disabled adults in your community? How does this ratio compare with the state and similar counties?)				
3. To what extent can older and disabled adults obtain	1 2	3	4	5
emergency dental care (such as care for abscesses or an accident resulting in tooth loss) when needed?				
(What emergency dental services are available? Where and when are they available? Do dental clinics and/or Medicaid providers in your community offer emergency care, or is care available only to private-pay consumers?)				
4. How sufficient is public funding to provide dental care to all older and disabled adults in your community who need it?	1 2	3	4	5

(What funding sources pay for dental care services for older and disabled adults in your community? Are there longer waiting lists for					
specific payer sources? What is the per capita expenditure on publicly funded dental care services in your community? How does					
this compare to the state average and comparable counties?)					
OVERALL ADEQUACY RATING	1	2	3	4	5

C. ACCESSIBILITY How obtainable are those services for those most in		49			
How obtainable are these services for those most in	T		2	1	5
To what extent do dentists accept Medicaid in your community?	1	2	3	4	5
(What % of dentists in your community accept Medicaid? What % of consumers are Medicaid-eligible?)					
2. To what extent is transportation available for people who need to access dental care?	1	2	3	4	5
(What medical transportation services are available to older and disabled adults for dental care? Are there parts of your community which do not have access to transportation services? How much does it cost? How long of a waiting period is there? What public transportation is available?)					
3. To what degree does the general public know about programs that provide dental care services to low-income	1	2	3	4	5
older and disabled adults in your community?					
(What special dental programs are available for older and disabled adults in your community? How and where do they advertise their services? What % of consumers are self- or family-referred? What % of self- or family-referrals are appropriate?)					
4. To what extent do key referral sources (ex. physicians, discharge planners, care managers, etc.) know about dental	1	2	3	4	5
care programs that assist low-income consumers in your community?					
(What types of outreach and/or educational programs do dental care programs conduct for key referral sources? What % of referrals are from key referral sources? What % of these referrals are appropriate?)					
5. To what extent is funding available to consumers in need of financial assistance?	1	2	3	4	5
(Are there any funds other than Medicaid to assist older and disabled adults with dental needs in your community? If so, what are the eligibility requirements? How long does it take to qualify? What services are covered? Do any dentists offer sliding fee scales or discounts?)					
6. To what degree are dentists' offices and clinics handicapped	1	2	3	4	5

accessible?					
(Do the offices and clinics in your community comply with ADA laws/regulations? Are offices and clinics located on public transportation routes?)					
7. To what extent are dentists available after hours and on weekends?	1	2	3	4	5
OVERALL ACCESSIBILITY RATING	1	2	3	4	5

D. EFFICIENCY AND DUPLICATION OF SER	D. EFFICIENCY AND DUPLICATION OF SERVICES				
How reasonable are the costs of services?					
Are options for streamlining services available in the co	omm	unit	y?		
1. How reasonable are the costs of dental care services in your community?	1	2	3	4	5
(What is the average cost of dental services (such as a cleaning, filling, dentures, etc.) compared to state and comparable county averages?)					
2. To what degree does Medicaid reimbursement cover the actual cost of dental work?	1	2	3	4	5
(What is the Medicaid and reimbursement schedule compared to actual service costs? Is the Medicaid reimbursement rate a barrier to dentists who do not currently offer services to Medicaid consumers?)					
OVERALL EFFICIENCY AND DUPLICATION RATING	1	2	3	4	5

E. EQUITY How available are these services to all who need them w	ithou	ıt bi	as?		
1. To what extent are dental care services available or in close proximity to residents in all geographic areas in your community?	1	2	3	4	5
(Where are dentist offices in your community? Are there any population centers and large rural areas without dentists? Are dentists' offices on public transportation routes?)					
2. To what degree are dental care services available to all populations in your community without bias?	1	2	3	4	5
(Are there any groups of people who have problems receiving dental care in your community? Are there reasons for this other than the ability to pay and/or funding source?)					
OVERALL EQUITY RATING	1	2	3	4	5

F. Quality/Effectiveness					
How successful are these services in addressing consum	ers'	need	ds?		
1. To what extent are dentists operating in good standing with the community?	1	2	3	4	5
(How many dentists have had their license revoked or on probation in the past 5 years? How many dental malpractice lawsuits have been filed in the past 5 years in your community? What were the results?)					
2. To what degree are older/disabled adults having good dental experience?	1	2	3	4	5
(What is the prevalence of dental disease in the county? What % of older adults have kept most or all of their teeth? How does this compare to the state average and similar counties?)					
3. To what extent are there dental health prevention programs targeting older and disabled adults in your community?	1	2	3	4	5
(What is the nature of the programs? Who runs the programs? Who do they reach? What services are provided?)					
4. To what extent are the dental care needs of older and disabled adults in your community being addressed in a sufficient manner?	1	2	3	4	5
(How many people went to emergency rooms for dental problems in the past year? What % of older and disabled adults [estimate] have not been to the dentist in your community in the past year?)					
5. To what extent do dentists regularly provide education and communicate unmet needs to county commissioners, planning, and other agencies?	1	2	3	4	5
(To what extent do providers of public health and social programs [e.g. nutrition programs] communicate the dental needs of older adults to county commissioners, planning bodies, and other agencies in your community? Do dentists who serve older and disabled adults [especially those accepting Medicaid and/or practicing at a lowincome clinic] attend meetings to assess and plan for meeting the needs of older and disabled adults in your community? Have dental needs ever been discussed during these meetings?)					
OVERALL QUALITY/EFFECTIVENESS RATING	1	2	3	4	5

Recap of Overall Dental Care Ratings							
Existence	1	2	3	4	5		
Adequacy	1	2	3	4	5		
Accessibility	1	2	3	4	5		
Efficiency and Duplication	1	2	3	4	5		
Equity	1	2	3	4	5		
Quality/Effectiveness	1	2	3	4	5		

<u>Dental Care's Major Strengths:</u>

Identified Barriers and Areas for Improvement: